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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: O.G. WILSON, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: O.G. WILSON III
11941 U.S. Hwy 1
North Palm Beach FL 33468 City, State & Zip
561. 775.202 Daytime Telephone number
wilsons je welers@ camcast, net E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: O.G. Wilson, Inc. ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if differ 11941 U.S. Hwy North Palm 34*08* **PURPOSE** operation of a retail store The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: 1000 INITIAL OFFICERS AND/OR DIRECTORS Name and Title: O.G. WILSON TIT PRES, Name and Title: SANDRA WILSON Address: 1180 GULFSTREAM WAY Address: 603 Commons Lai RIVIERA BEACH Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ARTICLE VII INCORPORATOR The <u>name and address</u> of the Incorporator is: Name: Address:

this certificate, I am familiat with that accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

Date

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes withird degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator Date